

2001 UNIFORM BUSINESS REPORT (UBR)

4/11

FILED
May 18, 2001 8:00 am
Secretary of State

04-18-2001 90053 050 ***141.25

05-18-2001 91249 024 *****8.75

DOCUMENT # F99000002765

1. Entity Name

HUMPHREY-THOLLANDER CORP.

Principal Place of Business

12301 OLD COLUMBIA PIKE, SUITE 300
 SILVER SPRING MD 20904

Mailing Address

12301 OLD COLUMBIA PIKE, SUITE 300
 SILVER SPRING MD 20904

2. Principal Place of Business

7170 Riverwood Drive

Suite, Apt. #, etc.

3. Mailing Address

7170 Riverwood Drive

Suite, Apt. #, etc.

City & State

Columbia, MD

City & State

Columbia, MD

Zip

21046

Country

Zip

21046

Country

4. FEI Number

52-2171240

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WRIGHT, KENNETH W ESQ.
 20 NORTH ORANGE AVE., SUITE 1000
 ORLANDO FL 32801**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	C	☐ Delete
NAME	HUMPHREY, JAMES I JR	
STREET ADDRESS	12301 OLD COLUMBIA PIKE, SUITE 300	
CITY-ST-ZIP	SILVER SPRING MD 20904	
TITLE	DP	☐ Delete
NAME	THOLLANDER, ROBERT	
STREET ADDRESS	12301 OLD COLUMBIA PIKE, SUITE 300	
CITY-ST-ZIP	SILVER SPRING MD 20904	
TITLE	DST	☐ Delete
NAME	HOOPER, BETHANY H	
STREET ADDRESS	12301 OLD COLUMBIA PIKE, SUITE 300	
CITY-ST-ZIP	SILVER SPRING MD 20904	
TITLE	VP	☐ Delete
NAME	BARILA, TIMOTHY P	
STREET ADDRESS	12301 OLD COLUMBIA PIKE, SUITE 300	
CITY-ST-ZIP	SILVER SPRING MD 20904	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME	7170 Riverwood Drive, Columbia, MD 21046	
STREET ADDRESS	7170 Riverwood Drive	
CITY-ST-ZIP	Columbia, MD 21046	
TITLE		☒ Change ☐ Addition
NAME	7170 Riverwood Drive	
STREET ADDRESS	7170 Riverwood Drive	
CITY-ST-ZIP	Columbia, MD 21046	
TITLE		☒ Change ☐ Addition
NAME	7170 Riverwood Drive	
STREET ADDRESS	7170 Riverwood Drive	
CITY-ST-ZIP	Columbia, MD 21046	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/01

Daytime Phone #

443-259-4900

CF2ED34 (10/00)